

P08000050820

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

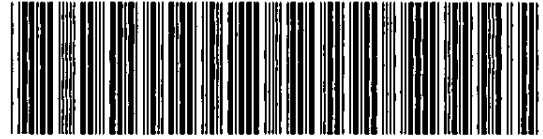
(Business Entity Name)

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TALLAHASSEE, FLORIDA

Off Resign
Tlerr
1-30-09

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: EMS ROLLOFF, INC.
(Name of Corporation)

DOCUMENT NUMBER: P08000050820

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:

RAUL SCHERRER
(Name of Person)

EMS ROLLOFF, INC.
(Name of Firm/Company)

425 NE 42ND STREET
(Address)

BOCA RATON, FL 33431
(City/State and Zip Code)

For further information concerning this matter, please call:

RAUL SCHERRER at (954) 658-0441
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**


FILED
09 JAN 23 AM 11:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, EMIS MARTIN, hereby resign as PRESIDENT
(Title)

of EMS ROLLOFF, INC.
(Name of Corporation)

P08000050820, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA

X 
(Signature of resigning officer/director)

FILING FEE IS \$35.00

Make checks payable to Florida Department of State and mail to:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314